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Sib Data Sheet

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**APPLICANTS**

Boris Yanovsky, Saratoga, CA;

**\*\* CONTINUING DATA** *HS***\*\* FOREIGN APPLICATIONS** *HS***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 06/07/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	6	36	2
Verified and Acknowledged	<i>[Signature]</i> <i>HS</i>	Examiner's Signature Initials			

**ADDRESS**

Michael J. Mallie  
 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP  
 Seventh Floor  
 12400 Wilshire Boulevard  
 Los Angeles, CA 90025-1026

**TITLE**

System and method for network virus protection

FILING FEE RECEIVED 1128	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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